	11641	73				
FORM D	UNITED STATES \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	'	OMB APPROVAL			
SE	CURITIES AND EXCHANGE COMMISSION	OMB Nu	1			
	Washington, D.C. 20549	Expires:	May 31, 2005			
	FORM D PROCE	SSED				
	FORM D PROCE  NOTICE OF SALE OF SECURITIES  PURSUANT TO REGULATION D. THO	Estimated	average burden hours per			
	1 CEP 1	6 Milesponse.	18.00			
	NOTICE OF SALE OF SECURITIES'	45074	SEC USE ONLY			
	PURSUANT TO REGULATION D, THO	NCIAL Prefix	Serial			
i di iila bibib iibbi iibbi iibii abib biili bbibb iili bbibb	SECTION 4(6), AND/OR		DATE RECEIVED			
03031746 <i>U</i> NI	FORM LIMITED OFFERING EXEMPTIO	N				
Name of Offering ( check if thi	s is an amendment and name has changed, and indica	ate change )				
Issuance of Units of Beneficial Interest	5 15 dil differiament and name has endinged, and male	are change.)				
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 50	6 Section 4	4(6) ULOE			
Type of Filing: New Filing		F	Tomas Comments			
	A. BASIC IDENTIFICATION DATA		2000 B.M.O.			
1. Enter the information requested about th		<u> </u>				
	nendment and name has changed, and indicate chang	ge.)	SEP 1 5 2003			
Wells Fargo Multi-Strategy 100 Hedge F		ļ.				
Address of Executive Offices	(Number and Street, City, State, Zip Code)		ephone Number (Including Area-Code)			
c/o Wells Fargo Alternative Asset	420 Montgomery Street	$(415) 222-40\overline{00}$				
Management, LLC	San Francisco, California 94104	Televilene	ahan (Tarahadina Anan Cada)			
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	l elephone Nur	mber (Including Area Code)			
·	e Investment Company	<u> </u>				
Type of Business Organization	e investment company					
corporation	limited partnership, already formed	other (ple	ase specify): limited liability			
		<b>23</b> (m.e. (p.e	company			
business trust	limited partnership, to be formed					
	Month Ye					
Actual or Estimated Date of Incorporation	or Organization: 0 8 0	1 🛛 Actua	l Estimated			
Jurisdiction of Incorporation or Organization	on: (Enter two-letter U.S. Postal Service abbrevia	tion for State:				
-	CN for Canada; FN for other foreign jurisdict	ion)	D E			
CENEDAL INCEDICATIONS						

## **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A Notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sale are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENT	IFICATION DATA		
2. Enter the information requested for the following:			
• Each promoter of the issuer, if the issuer has been organized w	ithin the past five years;		
• Each beneficial owner having the power to vote or dispose, securities of the issuer;	or direct the vote or disp	position of, 10%	or more of a class of equity
<ul> <li>Each executive officer and director of corporate issuers and of</li> <li>Each general and managing partner of partnership issuers.</li> </ul>	corporate general and ma	naging partners o	f partnership issuers; and
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Wells Fargo Alternative Asset Management, LLC			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
420 Montgomery Street, San Francisco, California 94104			
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Mooradian, Dennis J.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
420 Montgomery Street, San Francisco, California 94104			
Check Box(es) that Apply:  Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Leach, Timothy J.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
420 Montgomery Street, San Francisco, California 94104			
Check Box(es) that Apply:  Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Rauchle, Daniel J.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
420 Montgomery Street, San Francisco, California 94104			

				В.	INFORMA	TION AB	OUT OFF	ERING				
											Ye	
1. H	as the issuer	sold, đr doe						_	g?		$\square$	
2 11	The section of the se			• •	endix, Colu		_				e = 6	0 000 +
2. W	hat is the min	nimum inve	estment that	will be acc	epted from	any individ	uai:	••••••		• • • • • • • • • • • • • • • • • • • •		0,000 * y be waived
											- ma Ye	•
											×	
3. D	oes the offeri	ng permit j	oint owners	hip of a sin	gle unit?							
4. E	nter the info	rmation red	quested for	each perso	on who has	been or v	vill be paid	l or given,	directly or	indirectly,	any	
	ommission or											
	person to be ates, list the											
	oker or deale											
Full N	ame (Last na	me first, if	individual)									
	Fargo Inves											
	ess or Resider		•	-	•	Zip Code)						
	alifornia Str			ancisco, 94	1104			<del></del>				
Name	of Associated	Broker or	Dealer									
States	in Which Per	son Listed	has Solicite	ed or Intend	ls to Solicit	Purchasers						
	eck "All State									•••••	⊠ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	lame (Last na	me first, if	individual)									
Ducin	ess or Reside	noo Addros	c (Number	and Streat	City State	7in Codo)						
Dusin	ess of Reside	nce Addres	s (Mullibel	and Sueet,	City, State,	Zip Code)						
Name	of Associated	d Broker or	Dealer									
States	in Which Per	rson Listed	has Solicite	ed or Intend	ls to Solicit	Purchasers						
(Ch	eck "All State	es" or checl	k individual	States)	•••••			•••••		•••••	☐ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] lame (Last na	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii iv	iaille (Last lia	me mst, n	ilidividual)									
Busin	ess or Reside	nce Addres	s (Number	and Street.	City, State.	Zip Code)	<del></del>	· · · · · · · · · · · · · · · · · · ·				
2 40111	••••		.5 (110111041	una su vv.,	orey, orace,	Sip Code)						
Name	of Associate	d Broker or	r Dealer									
	in Which Pe											
-	eck "All State			•							☐ All	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[141]	[TAT]	[14 4 ]	[TATT]	[143]	[TAIAT]	[NY]		נייון	ردين	[OK]		[ւ ʌւ]

TX) (UT) [VT] [VA] [WA] [WV] [WI] [WY] [PR]

[B]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$ 0	\$ 0
	Equity	\$ 0	\$ 0
	Common Preferred		
	Convertible Securities (including warrants)	<u>\$ 0</u>	<u>\$0</u>
	Partnership Interests	\$0	\$ 0
	Other (Specify Units of Beneficial Interest)	\$100,000,000	\$43,043,839.64
	Total	\$100,000,000	\$43,043,839.64
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and aggregate dollar amount of their purchases on the		Aggragata
	total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
	Accredited Investors	Investors 87	of Purchases \$43,043,839.64
		0	\$0
	Non-accredited Investors	N/A	N/A
	Total (for filings under Rule 504 only)		1V/A
_	Answer also in Appendix, Column 3, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A	\$ N/A
	Rule 504	N/A	\$ N/A
	Total	N/A	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 0
٠	Printing and Engraving Costs		\$ 0
	Legal Fees	F-7	\$111,820.62
	Accounting Fees		\$ 0
	Engineering Fees	$\overline{}$	\$ 0
	Sales Commissions (specify finders' fees separately)	_	\$463,178.33
	Other Expenses (identify):		\$0
	Total	<b>5</b> 7	\$574,998.95

	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPEN	ISES A	AND	USE OF PROC	EEDS	
	b. Enter the difference between the aggregate of Question 1 and total expenses furnished in response the "adjusted gross proceeds to the issuer."	se to Part C - Question 4.a. This diff	ference	e is			\$99,425,001.10
5.	Indicate below the amount of the adjusted gross p used for each of the purposes shown. If the amou estimate and check the box to the left of the estin equal the adjusted gross proceeds to the issuer se above.	unt for any purpose is not known, f mate. The total of the payments lis	urnish sted m	an ust		·	
					Payments to Officers, Directors, & Affiliates		Payments To Others
Sa	laries and fees			\$	Allmates		\$
Pu	rchase of real estate			\$			\$
Pu	rchase, rental or leasing and installation of machine	ery and equipment		\$			\$
Co	onstruction or leasing of plant buildings and facilitie	es		\$			\$
of	equisition of other businesses (including the valuering that may be used in exchange for the asset resuant to a merger)	s or securities of another issuer	_	\$			\$
•	payment of indebtedness			<u>*</u>			\$
	orking capital			<u>*</u>		⊠	\$99,425,001.10
	her (specify):			\$			\$
				\$			\$
Co	olumn Totals			\$		$\boxtimes$	\$99,425,001.10
To	tal Payments Listed (column totals added)				<b>⊠</b> \$99,425		
		D. FEDERAL SIGNATURE					
_		D. PEDERAL SIGNATORE	<del></del>				
fol	e issuer has duly caused this notice to be signed lowing signature constitutes an undertaking by the staff, the information furnished by the issuer to any	issuer to furnish to the U.S. Securi	ities a	nd E	xchange Commiss	ion, up	
Iss W		Signature  Hun VIII		-	Date September		2003
	nniel J. Rauchle	Title of Signer (Print or Type)  President of Wells Fargo Alt  Member	ernati	ive .	Asset Managem	ent, I	LLC, its Managing

		E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 press of such rule?			Yes	No ⊠
	Se	ee Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to fu (17 CFR 239.500) at such times as required by		which this notice is filed	d, a notice	on Form D
3.	The undersigned issuer hereby undertakes to fu offerees.	rnish to the state administrators, upon written r	equest, information furr	nished by t	the issuer to
4.	The undersigned issuer represents that the issue Offering Exemption (ULOE) of the state in vexemption has the burden of establishing that the	which this notice is filed and understands that			
	e issuer has read this notification and knows the lersigned duly authorized person.	he contents to be true and has duly caused t	his notice to be signed	on its be	half by the
	uer (Print or Type) ells Fargo Multi-Strategy 100 Hedge Fund, C	Signature Um M	Date September 12,	2003	
	me of Signer (Print or Type) niel J. Rauchle	Title of Signer (Print or Type)  President of Wells Fargo Alternative  Member	Asset Management, l	LLC, its	Managing

			· · · · · · · · · · · · · · · · · · ·	A	PPENDIX				5
1	Intend to non-a investor	1 to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	aggregate offering price offered in state  Type of investor and amount					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ	<del></del>	X	Units of Beneficial Interest	14	\$3,732,410.77	0	\$0		Х
AR	<del></del> -								
CA		X	Units of Beneficial Interest	38	\$15,272,010.43	0	\$0		Х
со		X	Units of Beneficial Interest	5	\$3,224,000	0	\$0		X
СТ							<del>,</del>		
DE		X	Units of Beneficial Interest	1	\$500,000	0	0		X
DC									(
FL									
GA									
Н									
ID		X	Units of Beneficial Interest	2	\$495,880	0	\$0		X
īL									
IN									
IA		X	Units of Beneficial Interest	3	\$1,006,500	0	\$0		X
KS	<u></u>								
KY								<del></del>	
LA									
ME	_ <del>.</del>							<del> </del>	
MD									
MA		X	Units of Beneficial Interest	1	\$490,000	9	\$0		X
MI								<u> </u>	
MN		Х	Units of Beneficial Interest	8	\$2,319,806.36	0	\$0		X
MS									
МО	<del></del>								
			]					<u> </u>	

				Al	PPENDIX				
1	Intend to non-a investor	l'to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of invest purchased in Sta	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE	<del>-</del>	X	Units of Beneficial Interest	4	\$2,886,000	0	\$0		X
NV		X	Units of Beneficial Interest	3	\$3,200,000	0	\$0		X
NH		X	Units of Beneficial Interest	1	\$196,000	0	\$0		Х
NJ				<u> </u>					
NM									
NY									
NC							·		
ND	-								
ОН					<del> </del>				
OK					<del> </del>		<u> </u>		
OR		<u> </u>							
PA									
RI									
SC		<b>_</b>			<del> </del>			1	
SD		X	Units of Beneficial Interest	1	\$500,000	0	\$0		Х
TN							<del></del>		
TX		X	Units of Beneficial Interest	76	\$2,346,600	0	\$0		Х
UT		X	Units of Beneficial Interest	5	\$1,677,992.63	0	\$0		Х
VT	<u>.                                  </u>		-						
VA									
WA		Х	Units of Beneficial Interest	5	\$2,724,759.45	0	\$0		Х
wv					<del>                                     </del>				
WI		X	Units of Beneficial Interest	3	\$2,166,000	0	\$0		X
WY		х	Units of Beneficial Interest	1	\$201,880	0	\$0		X
NON- US									